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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	ır full name		
	Writ	te the name that is on	Armando	
	pictu	r government-issued ure identification (for mple, your driver's	First name	First name
	licer	nse or passport).	Middle name	Middle name
	Brin	g your picture	Pineda,, Jr.	
	iden with	ntification to your meeting the trustee.	Pineda,, Jr. Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ude your married or den names.		
3.	you nun Indi	ly the last 4 digits of Ir Social Security In the security In the security In the last of the security In the last 4 digits of the security In th	xxx-xx-1741	

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Del	otor 1 Pineda,, Armando	o Jr.	Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINS	EINs
5.	Where you live	8013 S Kolmar Ave Chicago, IL 60652-2033	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Cook	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Deb	tor 1	Pineda,, Armando	Jr.				Case number (if known)			
Par	t 2:	Tell the Court About Y	our Bank	ruptcy Ca	Se					
7.	Bank	chapter of the			rief description of each, see <i>Notic</i> he top of page 1 and check the ap		I U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form			
	cnoc	sing to file under	■ Chap	Chapter 7						
			☐ Chap	ter 11						
			☐ Chap	ter 12			·			
			☐ Chap	ter 13						
8.	How	you will pay the fee	abo	out how you our attorned accept to pay	u may pay. Typically, if you are pay by is submitting your payment on y ddress.	ying the fee your your behalf, your a choose this option	with the clerk's office in your local court for more details self, you may pay with cash, cashier's check, or money ordeattorney may pay with a credit card or check with a n, sign and attach the Application for Individuals to Pay The			
			Fili	equest that required t ar family si	o, waive your fee, and may do so	quest this option only if your income in installments	only if you are filing for Chapter 7. By law, a judge may, but the is less than 150% of the official poverty line that applies to the chapter of the chapter			
9.		you filed for ruptcy within the last	■ No.							
	o yea		L res.	District	,	<i>N</i> hen	Case number			
				District		When	Case number			
				District		When	Case number			
10.	pend a spe this d a bus	any bankruptcy cases ling or being filed by buse who is not filing case with you, or by siness partner, or by	■ No □ Yes.							
	an ai	filiate?		Debtor			Relationship to you			
				District			Case number, if known			
				Debtor			Relationship to you			
				District		When	Case number, if known			
11.	Do v	ou rent your	■ No.	Go to	line 12.					
		lence?	■ No.			idament sasinet i	you and do you want to stay in your residence?			
			∟ res.		No. Go to line 12.	ioginoin against	you and do you main to stay in your residence:			
						out an Eviction J	udgment Against You (Form 101A) and file it with this			

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Debtor 1 Pineda,, Arr	otor 1 Pineda,, Armando	Jr.			Case number (if known)
_	Descrit Alexant Asses Descri	-1 N	· · · · · · · · ·	O-I- Dunudata	
Par	Report About Any Bus	sinesses i	ou Own a	s a Sole Proprieto	or
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to F	Part 4.	
		☐ Yes.	Name a	and location of bus	iness
	A sole proprietorship is a				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any	
	If you have more than one sole proprietorship, use a		Numbe	r, Street, City, Sta	te & ZIP Code
	separate sheet and attach it to this petition.		Check	the anomoriate ho	x to describe your business:
	to and poddom			• • •	ness (as defined in 11 U.S.C. § 101(27A))
					Estate (as defined in 11 U.S.C. § 101(51B))
				•	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))
				None of the above	
			6 11 1	<u> </u>	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines	. If you indi s, cash-flov	cate that you are a	ourt must know whether you are a small business debtor so that it can set appropriate small business debtor, you must attach your most recent balance sheet, statement of deral income tax return or if any of these documents do not exist, follow the procedure in 11
	For a definition of small	■ No.	I am no	ot filing under Char	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	l am fili Code.	ng under Chapter	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	l am fili	ng under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Anv	Hazardou	s Property or Any	Property That Needs Immediate Attention
	Do you own or have any				
	property that poses or is	No.			
	alleged to pose a threat of imminent and identifiable hazard to public health or	☐ Yes.	What is th	e hazard?	
	safety? Or do you own any property that needs immediate attention?			ate attention is thy is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	
	- ·				Number, Street, City, State & Zip Code

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Deb	tor 1 Pineda,, Armando	Jr.			Case number (if known)
Part	5: Explain Your Efforts t	to Red	ceive a Briefing About Credit Counseling		
		Abo	ut Debtor 1:	Abo	ut Debtor 2 (Spouse Only in a Joint Case):
15.	Tell the court whether	You	must check one:		must check one:
	you have received a briefing about credit counseling.		I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.		I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
	The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You		Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.		Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
	must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.		I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.		I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.
	If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors		Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.		Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.
	you paid, and your creditors can begin collection activities again.		I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.		I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.
			To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this		To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.
			case. Your case may be dismissed if the court is		Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.
			dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed,		If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.
			if any. If you do not do so, your case may be dismissed.		Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.
			Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.		
			I am not required to receive a briefing about credit counseling because of:		I am not required to receive a briefing about credit counseling because of:
			Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.		Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
			☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.		Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
			Active duty. I am currently on active military duty in a military combat zone.		Active duty. I am currently on active military duty in a military combat zone.
			If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.		If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	otor 1 Pineda,, Armando	Jr.		Case number(if if	known)
Par	t 6: Answer These Question	ons for Repo	rting Purposes		
16.	What kind of debts do you have?		re your debts primarily consur dividual primarily for a personal, f	mer debts? Consumer debts are defined i amily, or household purpose."	n 11 U.S.C.§ 101(8) as 'incurred by an
			No. Go to line 16b.		
			Yes. Go to line 17.		
	`			ss debts? Business debts are debts that yough the operation of the business or invest	
			No. Go to line 16c.		
			Yes. Go to line 17.		
		16c. Si	ate the type of debts you owe tha	it are not consumer debts or business debt	s
17.	Are you filing under Chapter 7?	□ No. 1 a	nm not filing under Chapter 7. Go	o to line 18.	P P B A C P and more than the constraints of the co
	Do you estimate that after any exempt property is excluded and			estimate that after any exempt property is distribute to unsecured creditors?	excluded and administrative expenses are
	administrative expenses are paid that funds will be		No		
	available for distribution to unsecured creditors?		Yes		
18.	How many Creditors do	1 -49		☐ 1,000-5,000	25,001-50,000
	you estimate that you owe?	□ 50-99		☐ 5001-10,000 ☐ 10,001,05,000	50,001-100,000
		☐ 100-199 ☐ 200-999		□ 10,001-25,000	☐ More than100,000
19.	How much do you	\$0 - \$50.	000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	estimate your assets to be worth?	□ \$50,001	- \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion
		□ \$100,001 □ \$500,001		□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
20.		□ \$0 - \$50,	000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	estimate your liabilities to be?	\$50,001		□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion
		\$100,001 \$500,001		☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
		— \$300,001	- \$1 111111011		
Pan					
FOF	you		•	der penalty of perjury that the information p	
		If I have cho States Code	sen to file under Chapter 7, I am . I understand the relief available	n aware that I may proceed, if eligible, und under each chapter, and I choose to procee	er Chapter 7, 11,12, or 13 of title 11, Uniteded under Chapter 7.
			represents me and I did not pay d and read the notice required by	or agree to pay someone who is not an attorn 11 U.S.C. § 342(b).	orney to help me fill out this document, I
		I request reli	ef in accordance with the chapte	er of title 11, United States Code, specified	d in this petition.
	/			aling property, or obtaining money or prope prisonment for up to 20 years, or both. 18 L	rty by fraud in connection with a bankruptcy J.S.C. §§ 152, 1341, 1519, and 3571.
		Xrmando Signature of	Pinedá,, Jr. Debtor 1	Signature of Debtor 2	
		Executed on	February 24, 2016	Executed on	
			MM / DD / YYYY	MM / D	D/YYYY

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Debtor 1 Pineda,, Armand	o Jr.	Cas	se number (if known)
For your attorney, if you are represented by one	Chapter 7, 11, 12, or 13 of title 11, United Stat person is eligible. I also certify that I have deli which § 707(b)(4)(D) applies, certify that I hav	es Code, and have explained vered to the debtor(s) the noti	formed the debtor(s) about eligibility to proceed under the relief available under each chapter for which the ice required by 11 U.S.C. § 342(b) and, in a case in iry that the information in the schedules filed with the
an attorney, you do not need to file this page.	petition is incorrect. Isl Signature of Attorney for Debtor	Date	February 25, 2016
	Printed name Heller & Richmond, Ltd. Firm name		
	33 N Dearborn St Ste 1907 Chicago, IL 60602-3828 Number, Street, City, State & ZIP Code		
	Contact phone (312) 781-6700	Email address	<u> </u>

Case 16-06224 Doc 1 Filed 02/25/16 Entered 02/25/16 10:14:14 Desc Main Page 8 of 65 Document Fill in this information to identify your case and this filing: Debtor 1 Armando Pineda,, Jr. Middle Name Last Name First Name Debtor 2 Middle Name Last Name (Spouse, if filing) First Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. \square Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes

3.1	Make: Model:	Chrysler 300		Who has an interest in the property? Check one Debtor 1 only	Do not deduct secured cl the amount of any secure Creditors Who Have Clair	ed claims on Schedule D:
		2005 nate mileage: formation:	92000	□ Debtor 2 only□ Debtor 1 and Debtor 2 only□ At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
				☐ Check if this is community property	\$2,981.00	\$0.0
				(see instructions)		
3.2	Make:	Hyundai		(see instructions) Who has an interest in the property? Check one	Do not deduct secured cl	ed claims on Schedule D:
3.2	Model:	Sonata		(see instructions) Who has an interest in the property? Check one Debtor 1 only	Do not deduct secured cl	ed claims on Schedule D: ims Secured by Property.
3.2	Model: Year: Approxin		70000	(see instructions) Who has an interest in the property? Check one	Do not deduct secured cl	ed claims on Schedule D:

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

■ No

☐ Yes

Debtor 1	Pineda,, Armando Jr.	Document	Page 9 of 65 Case numbe	「 (if known)
			om Part 2, including any entries fo	or pages
Part 3: Da	escribe Your Personal and Housel	hold Items		
		ole interest in any of the followi	ng items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>Examp</i> □ No	old goods and furnishings les: Major appliances, furniture, li Describe	nens, china, kitchenware		Gaine of Oxemptione.
■ res.		I goods and furnishings		\$1,000.00
□ No	les: Televisions and radios; audio including cell phones, came Describe	ras, media players, games	ent; computers, printers, scanners; n	_
	laptop, TV	, Samsung Grand Prime		\$1,000.00
Examp ■ No □ Yes. 9. Equipm	collections, memorabilia, co Describe nent for sports and hobbies	Illectibles		p, coin, or baseball card collections; other
■ No □ Yes.	Describe			
□ No	ples: Pistols, rifles, shotguns, an	nmunition, and related equipment		
■ Yes.	Describe Ruger 9 m	 m		\$300.00
□ No		ner coats, designer wear, shoes, a	ccessories	\$500.00
■ No		ewelry, engagement rings, weddin	ng rings, heirloom jewelry, watches, g	ems, gold, silver
Exam ■ No	arm animals ples: Dogs, cats, birds, horses Describe			
14. Any o t		ems you did not already list, in	cluding any health aids you did n	ot list

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Case number (if known) Document Debtor 1 Pineda,, Armando Jr. 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for \$2,800.00 Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Cash on Hand \$11.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... \$600.00 Checking Account BMO Harris Bank 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description.

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

■ No
□ Yes.....

De	ebtor 1	Case 16-06224 Pineda,, Armando J		Filed 02/25/16 Document	Page 11 of 65	5/16 10:14:14 Case number (if known)	Desc Main
	■ No	equitable or future intere		ty (other than anything	listed in line 1), and I	rights or powers exerc	isable for your benefit
	Exam _l ■ No	s, copyrights, trademarks ples: Internet domain names Give specific information a	, websites, pro				
	Exam _l ■ No	ees, franchises, and other ples: Building permits, exclu	sive licenses, o		oldings, liquor licenses,	professional licenses	
Mo	oney or	property owed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No	funds owed to you Give specific information ab	pout them, inclu	uding whether you already	r filed the returns and th	ne tax years	
	Exam _l ■ No	support ples: Past due or lump sum Give specific information		ısal support, child suppo	rt, maintenance, divorc	e settlement, property s	settlement
	Exam _l ■ No	amounts someone owes y ples: Unpaid wages, disabili unpaid loans you mad Give specific information	ty insurance pa		s, sick pay, vacation pa	ıy, workers' compensati	on, Social Security benefits;
31.		sts in insurance policies ples: Health, disability, or life	e insurance; he	alth savings account (HS	A); credit, homeowner's	s, or renter's insurance	
	_	Name the insurance compa Con	ny of each poli npany name:	icy and list its value.	Beneficiar	у:	Surrender or refund value:
	If you a died. No	terest in property that is care the beneficiary of a living Give specific information				ently entitled to receive p	property because someone has
	Exam _l ■ No	s against third parties, who ples: Accidents, employmen	nt disputes, ins			r payment	
34.	Other o	contingent and unliquidat Describe each claim	ed claims of e	every nature, including	counterclaims of the	debtor and rights to so	et off claims
35.	Any fir ■ No	nancial assets you did not Give specific information					

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Case number (if known) Document Debtor 1 Pineda,, Armando Jr. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for \$611.00 Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 56. \$0.00 57. Part 3: Total personal and household items, line 15 \$2,800.00 58. Part 4: Total financial assets, line 36 \$611.00 Part 5: Total business-related property, line 45 59. \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00

\$0.00

Copy personal property total

\$3,411.00

\$3,411.00

\$3,411.00

Part 7: Total other property not listed, line 54

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

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Fill in this infor	mation to identify your	case:			
Debtor 1	Armando Pineda	,, Jr.			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIV	/ISION	
Case number (if known)					7 Check if t
				•	amended

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1	Which set of exemptions are	vou claiming?	Check one only	even if your s	spouse is filing with you

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
household goods and furnishings Line from Schedule A/B 6.1	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
Ellie Holli ochleddie PAD. G. 1			100% of fair market value, up to any applicable statutory limit	
laptop, TV, Samsung Grand Prime	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
Line Holli Schedule PAD. 7.1			100% of fair market value, up to any applicable statutory limit	
Ruger 9 mm Line from Schedule A/B 10.1	\$300.00		\$300.00	735 ILCS 5/12-1001(b)
Line nom schedule A/D. 10.1			100% of fair market value, up to any applicable statutory limit	
Necessary Clothing Line from Schedule A/B 11.1	\$500.00		\$500.00	735 ILCS 5/12-1001(a)
Line non Schedule PAD. 11.1			100% of fair market value, up to any applicable statutory limit	
Cash on Hand Line from Schedule A/B 16.1	\$11.00		\$11.00	735 ILCS 5/12-1001(b)
Line from Scriedule A/B. 16.1			100% of fair market value, up to any applicable statutory limit	

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Brief description of the property and line on Schedule A/B that lists this property			ount of the exemption you claim	Specific laws that allow exemption		
	Copy the value from Schedule A/B	Check only one box for each exemption.				
BMO Harris Bank Line from Schedule A/B 17.1	\$600.00		\$600.00	735 ILCS 5/12-1001(b)		
Line non schedule A/L 17.1			100% of fair market value, up to any applicable statutory limit			
Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) ■ No □ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?						
Yes. Did you acquire the property covered No	by the exemption withir	1 1,21	b days before you filed this case?			

3.

Yes

Case 16-06224 Doc 1 Filed 02/25/16 Entered 02/25/16 10:14:14 Desc Main Document Page 15 of 65 Fill in this information to identify your case: Debtor 1 Armando Pineda,, Jr. Middle Name Last Name First Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION Case number (if known) ☐ Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if 1. Do any creditors have claims secured by your property? ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims Column A Column B Column C 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecured portion much as possible, list the claims in alphabetical order according to the creditor 's name. Do not deduct the that supports this value of collateral. claim Regional Acceptance Co Describe the property that secures the claim: \$10,882.00 \$2.981.00 \$7,901.00 Creditor's Name 2005 Chrysler 300 Touring Rwd 4dr Sedan (3.5L 6cyl 4A) 765 Ela Rd Ste 205 As of the date you file, the claim is: Check all that Lake Zurich. IL 60047-6305 ☐ Contingent Number, Street, City, State & Zip Code ■ Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured ■ Debtor 1 only car loan) Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another ☐ Judgment lien from a lawsuit ☐ Check if this claim relates to a ☐ Other (including a right to offset) community debt Date debt was incurred Last 4 digits of account number 3201 Santander Consumer 2.2 \$16.592.00 \$6.452.00 \$10,140.00 Describe the property that secures the claim: **USA** Creditor's Name 2013 Hyundai Sonata GLS 4dr Sedan (2.4L 4cyl 6A) 8585 N Stemmons Fwy As of the date you file, the claim is: Check all that Ste 1100-N Dallas, TX 75247-3822 Contingent Number, Street, City, State & Zip Code ■ Unliquidated

Who owes the debt? Check one.

■ Debtor 1 only

Debtor 2 only

☐ Debtor 1 and Debtor 2 only

At least one of the debtors and another

☐ Check if this claim relates to a community debt

Date debt was incurred

☐ Disputed

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured

car loan)

☐ Statutory lien (such as tax lien, mechanic's lien)

☐ Judgment lien from a lawsuit

☐ Other (including a right to offset)

Last 4 digits of account number 1000 Case 16-06224 Doc 1 Filed 02/25/16 Entered 02/25/16 10:14:14 Desc Main Document Page 16 of 65

Debtor 1	Armando Pineda,, Jr.			Case number (if know)		
	First Name	Middle Name	Last Name			
If this is t Write tha	he last page of your form t number here:	n, add the dollar value	is page. Write that number here: e totals from all pages. at You Already Listed	\$27,474.00 \$27,474.00		
Use this trying to than one	page only if you have otl collect from you for a de	hers to be notified abo to tyou owe to someo ebts that you listed in	out your bankruptcy for a debt the one else, list the creditor in Part 1	hat you already listed in Part 1. For ex I, and then list the collection agency h ors here. If you do not have additional	nere. Similarly, if you have more	
Ro At 26	ame, Number, Street, City, egional Acceptanc ttn: Bankruptcy 66 Beacon Dr l'interville, NC 2859	e Co		On which line in Part 1 did you enter the Last 4 digits of account number 320		
Sa Po	ame, Number, Street, City, antander Consume O Box 961245 ort Worth, TX 7616	er USA		On which line in Part 1 did you enter the		

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Fill in this info	ormation to identify your c	ase:		
Debtor 1	Armando Pineda,	. Jr.		
	First Name	Middle Name	Last Name	-
Debtor 2	First Name	Middle Name	LandName	_
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court for the:	NORTHERN DISTRICT OF I	LLINOIS, EASTERN DIVISION	_ (
Case number				
(if known)				☐ Check if this is an
	,			amended filing
Official Es	*** 100F/F			
	rm 106E/F	lea Hacea Hacaaacea	-l Ola:	40/45
		ho Have Unsecured		12/15 NONPRIORITY claims. List the other party to
schedule G: Exe D: Creditors Who he Continuation ase number (if	cutory Contracts and Unexpi o Have Claims Secured by Pro Page to this page. If you hav	red Leases (Official Form 106G). operty. If more space is needed, e no information to report in a Pa	Do not include any creditors with partia copy the Part you need, fill it out, numb	/B: Property (Official Form 106A/B) and on ally secured claims that are listed in Schedule er the entries in the boxes on the left. Attach ny additional pages, write your name and
	litors have priority unsecured			
■ No. Go to	• •			
☐ Yes.				
	All of Your NONPRIORITY	Unsecured Claims		
3. Do any cred	litors have nonpriority unsec	ured claims against you?		
	• •	urt. Submit this form to the court wit	h your other schodules	
	nave nothing to report in this pa	irt. Submit this form to the court wit	n your other schedules.	
Yes.				
unsecured c	laim, list the creditor separately	for each claim. For each claim liste		oreditor has more than one nonpriority ist claims already included in Part 1. If more red claims fill out the Continuation Page of Part
				Total claim
4.1 Amer	icash Loans	Last 4 digits of a	ccount number	\$500.00
2	ority Creditor's Name			<u> </u>
D		When was the de	bt incurred?	
Ste 3	ruptcy Department 880 n	Lee St.		
	Plaines, IL 60016			
	r Street City State Zlp Code	As of the date yo	u file, the claim is: Check all that apply	
Who in	curred the debt? Check one.			
Deb	tor 1 only	☐ Contingent		
☐ Deb	otor 2 only	☐ Unliquidated		
☐ Deb	tor 1 and Debtor 2 only	☐ Disputed		
☐ At le	east one of the debtors and ano		ORITY unsecured claim:	
	ck if this claim is for a comm			
debt	laim subject to offeet?		sing out of a separation agreement or divo	rce that you did not
_	laim subject to offset?	report as priority cl	iaims on or profit-sharing plans, and other simila	r debte
■ No				i denis
☐ Yes		Other. Specify		

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Debtor 1 Pineda,, Armando Jr. Case number (if know) \$1,000.00 4.2 **Banfield Pet Hospital** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2221 Oakton Skokie, IL 60076 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 **Barclays Bank Delaware** Last 4 digits of account number 4682 \$1,497.00 Nonpriority Creditor's Name When was the debt incurred? 125 S West St Wilmington, DE 19801-5014 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.4 **Capital One** Last 4 digits of account number 4438 \$2,741.00 Nonpriority Creditor's Name When was the debt incurred? 15000 Capital One Dr Richmond, VA 23238-1119 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Case number (f know)

Debtor 1 Pineda,, Armando Jr. \$1,690.00 4.5 Capital One Last 4 digits of account number 8900 Nonpriority Creditor's Name When was the debt incurred? 15000 Capital One Dr Richmond, VA 23238-1119 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.6 **Castle Pay Loans** Last 4 digits of account number unknown Nonpriority Creditor's Name When was the debt incurred? N5384 US Highway 45 Ste 400 Watersmeet, MI 49969 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.7 Last 4 digits of account number \$336.00 Citi-citgo 1189 Nonpriority Creditor's Name When was the debt incurred? PO Box 6497 Sioux Falls, SD 57117-6497 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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	Filleda,, Affiliando 51.	- Case Humber (I know)	
4.8	Citi-Shell	Last 4 digits of account number 3282	\$417.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 6497		
	Sioux Falls, SD 57117-6497		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Пол	
	_	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
		Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.9	Comcast	Last 4 digits of account number 4188	\$300.00
	Nonpriority Creditor's Name	- When we do dold in some 10	·
	PO Box 3002	When was the debt incurred?	
	Southeastern, PA 19398-3002		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		
	☐ Yes	Other. Specify	
4.10	Comenity Bank/Carsons	Last 4 digits of account number 1518	\$509.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	3100 Easton Square PI		
	Columbus, OH 43219-6232		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	<u> </u>		
	■ Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐Yes	Other Specify	

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Jebioi	Pineda,, Armando Jr.	Case number (it know)	
4.11	Comenity Bank/Express Nonpriority Creditor's Name	Last 4 digits of account number 7547	\$1,248.00
	PO Box 182789 Columbus, OH 43218-2789	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.12	Comenity Bank/Nwyrk&Co	Last 4 digits of account number 4866	\$1,121.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	220 W Schrock Rd Westerville, OH 43081-2873		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.13	Comenity Bank/Vctrssec Nonpriority Creditor's Name	Last 4 digits of account number 1523	\$969.00
	Nonphonty Creditor's Name	When was the debt incurred?	
	PO Box 182789 Columbus, OH 43218-2789		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
	 1 €3	■ Other, Specify	

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Debic	Pineda,, Armando Jr.	Case number (if know)	
4.14	Creditonebnk	Last 4 digits of account number 6084	\$1,020.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 98875		
	Las Vegas, NV 89193-8875 Number Street City State Zlp Code	_	
		As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
	-	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	Other. Specify	
4.15	Creditonebnk	Last 4 digits of account number 9437	\$600.00
	Nonpriority Creditor's Name	When we the debt in some 40	
	PO Box 98875	When was the debt incurred?	
	Las Vegas, NV 89193-8875 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.16	Discover Fin Svcs LLC	Last 4 digits of account number 0722	\$1,533.00
0	Nonpriority Creditor's Name		φ1,333.00
		When was the debt incurred?	
	PO Box 15316		
	Wilmington, DE 19850-5316 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam is. Oneok an that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
		— Outer, Specify	

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Debi	Pineda,, Armando Jr.	Case number (if know)	
4.17	Dsnb Macys	Last 4 digits of account number 8830	\$383.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	9111 Duke Blvd		
	Mason, OH 45040-8999	_	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
	-	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No	<u>_</u>	
	Yes	Other. Specify	
4.18	Fst Premier	Last 4 digits of account number 3477	\$798.00
	Nonpriority Creditor's Name	When we the debt in some dO	
	3820 N Louise Ave	When was the debt incurred?	
	Sioux Falls, SD 57107-0145		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.19	Gold S Gym Woodlands	Last 4 digits of account number 8211	\$106.00
	Nonpriority Creditor's Name		Ψ100.00
		When was the debt incurred?	
	11 Currency Dr		
	Bloomington, IL 61704-9398 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other. Specify	
		— Julion Opcomy	

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Case number (fr know)

Deblo	Pineda,, Armando Jr.	Case number (it know)	
4.20	Jared-Galleria of Jwlr	Last 4 digits of account number 3282	\$239.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	375 Ghent Rd	Then was the dest mounted:	
	Fairlawn, OH 44333-4601		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.21	Kay Jewelers	Last 4 digits of account number 3265	\$1,540.00
	Nonpriority Creditor's Name	When we the debt in sum 10	<u> </u>
	375 Ghent Rd	When was the debt incurred?	
	Fairlawn, OH 44333-4601		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.22	Kay Jewelers	Last 4 digits of account number 9808	\$262.00
	Nonpriority Creditor's Name		
	275 Chant Dd	When was the debt incurred?	
	375 Ghent Rd Fairlawn, OH 44333-4601		
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ ves	Other Consider	

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Deblo	Pineda,, Armando Jr.	Case number (it know)	
4.23	Kohls/capone	Last 4 digits of account number 2035	\$444.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051		
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.24	Major Energy	Last 4 digits of account number	\$100.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	100 Dutch Hill Rd Ste 230	when was the debt incurred?	
	Orangeburg, NY 10962-2198		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.25	Monterey Financial Svc Nonpriority Creditor's Name	Last 4 digits of account number 1370	\$950.00
	Trenging of cause of training	When was the debt incurred?	
	4095 Avenida de la Plata Oceanside, CA 92056-5802		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	□ ves	Other Consider	

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Case number (fr know)

DCDIO	Filleda,, Armando Jr.	- Case Humber (in know)	
4.26	SPRINT Nonpriority Creditor's Name	Last 4 digits of account number	\$1,200.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	Bankruptcy Department 6200 Sprint Parkwa Overland Park, KS 66251 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.27	Syncb/amazon Nonpriority Creditor's Name	Last 4 digits of account number 3288	\$126.00
	Nonphority Greation's Name	When was the debt incurred?	
	PO Box 965015 Orlando, FL 32896-5015		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify	
4.00	0 14 5 1		4000.00
4.28	Syncb/Amer Eagle Nonpriority Creditor's Name	Last 4 digits of account number 9670	\$299.00
		When was the debt incurred?	
	PO Box 965005		
	Orlando, FL 32896-5005 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

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Debio	Pineda,, Armando Jr.	Case number (it know)	
4.29	Syncb/banana Rep	Last 4 digits of account number 0272	\$527.00
	Nonpriority Creditor's Name	When was the debt incurred?	
4.29 . 4.30 .	PO Box 965005		
	Orlando, FL 32896-5005	_	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
		_	
	Yes	Other. Specify	
4.30	Syncb/Bp	Last 4 digits of account number 3206	\$520.00
	Nonpriority Creditor's Name	When we the debt in sumed?	
	PO Box 965024	When was the debt incurred?	
	Orlando, FL 32896-5024		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
		· ,	
4.31	Syncb/Care Credit	Last 4 digits of account number 9052	\$719.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	950 Forrer Blvd	Wildi was the dest mounted.	
	Kettering, OH 45420-1469		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other, Specify	

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Case number (f know)

4.32	Syncb/dsctir	Last 4 digits of account number 3139	\$161.00
	Nonpriority Creditor's Name C/o	When was the debt incurred?	V.U.I.U
4.32	PO Box 965036		
	Orlando, FL 32896-5036 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
4.34	Who incurred the debt? Check one.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.33	Syncb/oldnav	Last 4 digits of account number 7958	\$623.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 965005	when was the debt incurred?	
	Orlando, FL 32896-5005		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐Yes	Other. Specify	
		— Otter. Specify	
4.34	Syncb/qvc	Last 4 digits of account number 0993	\$367.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 965018		
	Orlando, FL 32896-5018	_	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	■ Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loans	
	Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐Yes	Other. Specify	
			

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Case number (if know)

4.35 \$317.00 Syncb/tjx Last 4 digits of account number 7595 Nonpriority Creditor's Name When was the debt incurred? PO Box 965005 Orlando, FL 32896-5005 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.36 Last 4 digits of account number Syncb/walmar 3222 \$1,165.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 965024 Orlando, FL 32896-5024 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? 1st Crd Srvc Line 4.19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 377 Hoes Ln ■ Part 2: Creditors with Nonpriority Unsecured Claims Piscataway, NJ 08854-4138 Last 4 digits of account number 8211 On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Barclays Bank Delaware** Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 8801 ■ Part 2: Creditors with Nonpriority Unsecured Claims Wilmington, DE 19899-8801 Last 4 digits of account number 4682 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Capital One** Line 4.4 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Part 2: Creditors with Nonpriority Unsecured Claims PO Box 30285 Salt Lake City, UT 84130-0285 Last 4 digits of account number 4438 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?

Official Form 106 E/F

Debtor 1 Pineda,, Armando Jr.

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Last 4 digits of account number

Desc Main

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Doc 1

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Debtor 1 Pineda,, Armando Jr.

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Case number (fr know)

		3282	
Name and Address Kay Jewelers/Sterling Jewelers Inc. Sterling Jewelers PO Box 1799 Akron, OH 44309-1799	On which entry in Part 1 or Part 2 di Line <u>4.21</u> of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
744.01, 011 44000 1100	Last 4 digits of account number	3265	
Name and Address Kay Jewelers/Sterling Jewelers Inc. Sterling Jewelers PO Box 1799 Akron, OH 44309-1799	On which entry in Part 1 or Part 2 di Line 4.22 of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	9808	
Name and Address Kohls/Capital One PO Box 3120 Milwaukee, WI 53201-3120	On which entry in Part 1 or Part 2 di Line 4.23 of (Check one): Last 4 digits of account number	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 2035	
Name and Address Monterey Financial Svc PO Box 5199 Oceanside, CA 92052-5199	On which entry in Part 1 or Part 2 di Line 4.25 of (Check one): Last 4 digits of account number		
Name and Address Syncb Bank/American Eagle Attn: Bankruptcy PO Box 103104 Roswell, GA 30076-9104	On which entry in Part 1 or Part 2 di Line 4.28 of (Check one): Last 4 digits of account number	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 9670	
Name and Address Syncb/plcc Attn: Bankruptcy PO Box 103104 Roswell, GA 30076-9104	On which entry in Part 1 or Part 2 di Line 4.30 of (Check one): Last 4 digits of account number		
Name and Address Synchrony Bank/ Hh Gregg Attn: Bankruptcy PO Box 103104 Roswell, GA 30076-9104	On which entry in Part 1 or Part 2 di Line 4.32 of (<i>Check one</i>): Last 4 digits of account number	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 3139	
Name and Address Synchrony Bank/ Old Navy Attn: Bankruptcy PO Box 103104 Roswell, GA 30076-9104	On which entry in Part 1 or Part 2 di Line 4.33 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	7958	
Name and Address Synchrony Bank/Amazon Attn: Bankruptcy PO Box 103104 Roswell, GA 30076-9104	On which entry in Part 1 or Part 2 di Line <u>4.27</u> of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	3288	
Name and Address	On which entry in Part 1 or Part 2 di	id you list the original creditor?	

	ase 16-062 eda,, Armando		Doc 1	Filed 02/25/16 Document	Ente Page	red 02/ 32 of 6 Case r		10:14:14 know)	Desc	Main
Synchrony Bank/Banana Republic Attn: Bankruptcy PO Box 103104 Roswell, GA 30076-9104		Line 4.29 of (<i>Check one</i>):	-			vith Priority Unse				
Noswell, OA	30070-3104			Last 4 digits of account num	nber	02	272			
Name and Address Synchrony Bank/Care Credit Attn: bankruptcy PO Box 103104 Roswell, GA 30076-9104		On which entry in Part 1 or Line 4.31 of (Check one):	·	☐ Part 1: 0	Creditors w	litor? vith Priority Unse vith Nonpriority U				
, ,				Last 4 digits of account num	nber	9052				
Name and Address Synchrony Bank/Qvc GE Credit Retail Bank/Attn: Bankruptcy PO Box 103104 Roswell, GA 30076-9104		On which entry in Part 1 or Line 4.34 of (Check one):		☐ Part 1: 0	Creditors w	litor? vith Priority Unse vith Nonpriority U				
,				Last 4 digits of account num	nber	09	993			
Name and Address Synchrony Bank/Tjx Attn: Bankruptcy PO Box 103104		On which entry in Part 1 or Line 4.35 of (Check one):		☐ Part 1: 0	Creditors w	litor? vith Priority Unse vith Nonpriority U				
Roswell, GA	30076-9104			Last 4 digits of account num	nber	75	595			
Name and Address Synchrony Bank/Walmart Attn: Bankruptcy PO Box 103104 Roswell, GA 30076-9104		On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.36 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims								
Noswell, GA	30070-3104			Last 4 digits of account num	nber	32	222			
Name and Addrest Visa Dept St Attn: Bankru PO Box 8053	ore National B	ank		On which entry in Part 1 or Line 4.17 of (Check one):		id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims				
Mason, OH 4				Last 4 digits of account num	nber	88	330			
	7.1			nsecured Claim aims. This information is fo	r statistical	reporting	purposes	,	§159. Add tl	ne amounts for each
	6a. Domestic	suppo	ort obligation	ns		6a.	\$	Total Claim	0.00	
Total claims from Part 1				I injury while you were into	xicated	6b. 6c. 6d.	\$ \$ \$		0.00 0.00 0.00	
				nrough 6d.		6e.	\$		0.00	
	6f. Student lo	ans				6f.	\$	Total Claim	0.00	

Total claims from Part 2

6g.

6h.

6i.

6j.

Obligations arising out of a separation agreement or divorce that you did not report as priority claims
Debts to pension or profit-sharing plans, and other similar debts

Other. Add all other nonpriority unsecured claims. Write that amount

Total Nonpriority. Add lines 6f through 6i.

0.00

0.00

26,327.00

26,327.00

6h.

6i.

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			THE FAUE 33 OF 03	
Fill in this infor	mation to identify your	case:		
Debtor 1	Armando Pineda	,, Jr.		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVISION	
Case number				
,				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	n whom you have the er, Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				_
	rtamo				
	Number	Street			_
	City		State	ZIP Code	_
2.2	City		State	Zii Code	
2.2					_
	Name				
		0, ,			<u> </u>
	Number	Street			
	City		State	ZIP Code	
2.3					
	Name				_
	rvanic				
	Number	Street			_
	City		State	ZIP Code	_
0.4	City		State	ZIF Code	
2.4					<u></u>
	Name				
					_
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				_
	INAILIE				
	Number	Street			_
	. 10111001	311001			
	City		Ctata	ZID Code	<u> </u>
	City		State	ZIP Code	

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		Docume	ent Page 34 d	ot 65	
Fill in this	s information to identify your	case:			
Debtor 1	Armanda Binada	. Ir			
Debior 1	Armando Pineda First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, fil	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTER	RN DIVISION	
Case num	ber				
(if known)				☐ Check if this is an	
				amended filing	
O((; ·	15 10011				
Officia	ll Form 106H				
Sched	dule H: Your Cod	ebtors		12	/15
case numl	oer (if known). Answer every of you have any codebtors? (If	question.		e. On the top of any Additional Pages, write your nar	
■ No	s				
2 \\/i+	thin the last 8 years, have you	lived in a community pro	anorty state or territory	12 (Community property states and territories include A	rizono
	rnia, Idaho, Louisiana, Nevada			(Community property states and territories include And Wisconsin.)	izuria,
■ No	. Go to line 3.				
☐ Yes	s. Did your spouse, former spou	se, or legal equivalent live w	rith you at the time?		
line 2	again as a codebtor only if th , Schedule E/F (Official Form	at person is a guarantor	or cosigner. Make sure	f your spouse is filing with you. List the person sho e you have listed the creditor on Schedule D (Officia se Schedule D, Schedule E/F, or Schedule G to fill on	al Form
	Column 1: Your codebtor			Column 2: The creditor to whom you owe the d	ebt
	Name, Number, Street, City, State and Z	IP Code		Check all schedules that apply:	
3.1				☐ Schedule D, line	
<u> </u>	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street City	State	ZIP Code		
	City	State	ZIF Code		
3.2	Name			Schedule D, line	
	INGILIE			Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		

Official Form 106H Software Copyright (c) 1996-2016 CIN Group - www.cincompass.com

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Fill	in this information to identify your ca	se:				l				
Del	otor 1 Armando Pir	neda,, Jr.								
	otor 2									
Uni	ted States Bankruptcy Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS, EA	STERN						
	se number Jown)		-			🗀	An amende A supplement income as	ed filing ent showing	g postpetition o	chapter 13
0	fficial Form 106I						MM / DD/ Y	/YYY		
S	chedule I: Your Inco	me								12/15
spo atta	plying correct information. If you a use. If you are separated and your ch a separate sheet to this form. On the control of th	spouse is not filing wit	h you, do not inclu	de inform	atio	ı aboı	t your spou umber (if kr	ise. If more	e space is ne	eded,
	If you have more than one job,		■ Employed				☐ Empl	oyed		
	attach a separate page with information about additional	Employment status	☐ Not employed				☐ Not employed			
	employers.	Occupation	linen tech							
	Include part-time, seasonal, or self-employed work.	Employer's name	Aramark							
	Occupation may include student or homemaker, if it applies.	Employer's address	1101 Market S Philadelphia,		7-29	34				
		How long employed th	nere? <u>3 yea</u>	rs						
Par	t 2: Give Details About Mont	thly Income								
unle: If yo	mate monthly income as of the dat ss you are separated. u or your non-filing spouse have more	than one employer, com								
spac	e, attach a separate sheet to this form	٦.								
						For I	Debtor 1		btor 2 or ng spouse	
2.	List monthly gross wages, salary deductions). If not paid monthly, ca			2.	\$		2,143.12	\$	N/A	
3.	Estimate and list monthly overting	me pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add line	2 + line 3.		4.	\$	2	,143.12	\$	N/A	

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Debt	tor 1	Pineda,, Armando Jr.		C	ase nu	ımber (<i>if kno</i> w	n)				
					For D	ebtor 1			ebtor 2 or	se	
	Cop	by line 4 here	4.	_	\$	2,143.1	2	\$	N	I/A	
5.	List	t all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$	461.2	26	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$	0.0		\$		V/A	
	5c.	Voluntary contributions for retirement plans	5c.		\$	0.0	0	\$	N	N/A	
	5d.	Required repayments of retirement fund loans	5d		\$	0.0	0	\$	N	N/A	
	5e.	Insurance	5e.		\$	143.0	9	\$	N	N/A	
	5f.	Domestic support obligations	5f.		\$	0.0		\$		I/A	
	5g.	Union dues	5g.		\$	0.0	_	\$		\/A	
	5h.	Other deductions. Specify:	5h	.+	\$	0.0	0	+ \$	<u>N</u>	1/A	
6.	Add	d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	,	\$	604.3	5_	\$	N	1/A_	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	,	\$	1,538.7	7	\$	N	1/A	
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.		\$	0.0	10	\$		N/A	
	8b.	Interest and dividends	8b		<u>\$</u> —	0.0		\$		VA	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			\$ \$	0.0		\$		<u></u>	
	8d.	Unemployment compensation	8d		\$	0.0		\$		V/A	
	8e.	Social Security	8e.		\$	0.0	0	\$	N	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$	0.0	00	\$		N/A	
	8g.	Pension or retirement income	— 8g		\$	0.0		\$		V/A	
	8h.	Other monthly income. Specify: fiancee pays car payment	8h	.+	\$	395.0	0	+ \$	N	N/A	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		395.0	0	\$		N/A	
10	Cal	culate monthly income. Add line 7 + line 9.	10.	<u> </u>	1	933.77 +	\$		N/A = \$,933.77
10.		If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ <u> </u>	١,	933.77	Ψ-				,933.11
11.	othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your car friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not available: sister contributions	lepende						<i>le J</i> . 11. + \$		200.00
12.		the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certain									2,133.77
										nbine nthly i	d income
13.	Do :	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	?								

Official Form 106I Schedule I: Your Income page 2

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Fill ir	n this information to identify y	our case:				
Debto					ck if this is: An amended filing	
Debto	or 2 use, if filing)				•	ring postpetition chapter 13 following date:
Unite	d States Bankruptcy Court for the	e: NORTHERN DISTRICT OF ILLINGEASTERN DIVISION	OIS,	-	MM / DD / YYYY	
Case (If kno	number own)					
	ficial Form 106J					
	hedule J: Your	EXPENSES s possible. If two married people are	filing together, both	are equall	y responsible for s	12/1:
infor	mation. If more space is ne nown). Answer every quest	eded, attach another sheet to this fo ion.				
	Is this a joint case?	SHOIU				
	■ No. Go to line 2. □ Yes. Does Debtor 2 live	in a separate household?				
	☐ No ☐ Yes. Debtor 2 mu	st file Official Form 106J-2, Expenses	for Separate Househol	ldof Debtor	· 2.	
2.	Do you have dependents?	□ No				
	Do not list Debtor 1 and Debtor 2.	■ Yes. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	Do not state the dependents names.		stepsister		67	□ No ■ Yes
			niece		2	□ No ■ Yes
						□ No □ Yes □ No
3.	Do your expenses include expenses of people other t					☐ Yes
	yourself and your depende					
expe	mate your expenses as of y	ing Monthly Expenses our bankruptcy filing date unless yo bankruptcy is filed. If this is a supple				
valu		non-cash government assistance if gave included it on Schedule I: Your I			Your exp	enses
•	·	ship expenses for your residence. In	clude first mortgage	4. \$	i	790.00
	If not included in line 4:	-			_	
	4a. Real estate taxes			4a. \$:	0.00
		s, or renter's insurance		4a. \$ 4b. \$		0.00
	1 7	epair, and upkeep expenses		4c. \$		0.00
		tion or condominium dues		4d. \$		0.00
5.	Additional mortgage paym	ents for your residence, such as hom	ne equity loans	5. \$	•	0.00

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	Pineda,, Armando Jr. Ca	ise num	ber (if known)	
6.	Utilities:			
-	6a. Electricity, heat, natural gas	6a.	\$	140.00
	6b. Water, sewer, garbage collection	6b.	\$	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	180.00
	6d. Other. Specify:	6d.		0.00
	Food and housekeeping supplies	- 7.	\$	150.00
	Childcare and children's education costs	8.	\$	0.00
	Clothing, laundry, and dry cleaning	9.	\$	
		10.	\$	0.00
	Personal care products and services		·	6.00
	Medical and dental expenses	11.	\$	0.00
	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	100.00
	Entertainment, clubs, recreation, newspapers, magazines, and books	13.		0.00
	Charitable contributions and religious donations	14.		0.00
	Insurance.	14.	Ψ	0.00
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.		0.00
	15c. Vehicle insurance	15c.	\$	0.00
	15d. Other insurance. Specify:	15d.	·	
	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	- 13u.	Ψ	0.00
	Specify:	16.	\$	0.00
	Installment or lease payments: 17a. Car payments for Vehicle 1	17a.	¢	205.00
				395.00
	17b. Car payments for Vehicle 2	17b.	· -	373.00
	17c. Other Specify:	17c.		0.00
	17d. Other. Specify:	17d.	\$	0.00
	Your payments of alimony, maintenance, and support that you did not report as	18.	\$	0.00
	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you.	10.	\$	0.00
	Specify:	19.	Ψ	0.00
	Other real property expenses not included in lines 4 or 5 of this form or on <i>Schedule</i>	_	r Income	
	20a. Mortgages on other property	20a.		0.00
	20b. Real estate taxes	20b.	· -	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	·	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.		
				0.00
	20e. Homeowner's association or condominium dues	20e.	·	0.00
•	Other: Specify:	21.	+\$	0.00
<u>)</u> .	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	2,134.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	2,134.00
	220. Add into 220 and 220. The result is your monthly expenses.		L	2,134.00
	Calculate your monthly net income.			
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,133.77
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	2,134.00
				·
	23c. Subtract your monthly expenses from your monthly income.	23c.	_	0.00
	The result is your monthly net income.		\$	-0.23

modification to the t	enns of your mongage:
■ No.	
☐ Yes.	Explain here:

]
Fill in this inform	nation to identify your	case:			
Debtor 1	Armando Pineda First Name	,, Jr.	Last Name		
Debtor 2	i not italio	made Hane	Last Namo		1
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS, EASTERN	DIVISION	
Case number					
(if known)					☐ Check if this is an
					amended filing
Official Form	n 106Dec				
		an Individus	al Debtor's So	chadulas	
Declarat	IOII ADOUL 8	all illulviuue	di Debioi 3 30	riedules	12/15
If two married neg	onle are filing together	both are equally respe	onsible for supplying corre	ect information	
•		• • •	, -		
You must file this	form whenever you fil	le bankruptcy schedule	s or amended schedules.	Making a false state	ment, concealing property, or
	or property by fraud in 3 U.S.C. §§ 152, 1341, 1		ikruptcy case can result in	tines up to \$250,000), or imprisonment for up to 20
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Sign	Below				
Did you pay	or agree to pay some	one who is NOT an atto	orney to help you fill out ba	ankruptcy forms?	
■ No					
_					
☐ Yes. N	lame of person				nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
				Dooraration	n, and dignature (emotal Fermi Fre)
	ty of perjury, I declare true and correct.	that I have read the sur	mmary and schedules filed	with this declaration	n and
		1			
/ × 1 - 6	the fall	f.	X		
	do Pineda,, Jr. e of Debtor 1		Signature of	Deptor 2	
Signatur	e or nepror 1				
Date F	ebruary 24, 2016		Date	<u> </u>	

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		Docume	nt Page 40 of 65		
Fill in this inform	ation to identify your	case:			
Debtor 1	Armando Pineda	,, Jr.			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name	Ì	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVIS	SION	
Case number					☐ Check if this is an amended filing
					ŭ

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Pai	1: Summarize Your Assets		
		Your a	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	3,411.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	3,411.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	27,474.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e &chedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j & chedule E/F	\$	26,327.00
	Your total liabilities	\$	53,801.00
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$	2,133.77
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,134.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your of	her schedu	les.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a p purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159.	ersonal, fan	nily, or household

Official Form 106Sum

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the

court with your other schedules.

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Page 41 of 65 Case number (if known) Debtor 1 Pineda,, Armando Jr.

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 8. \$ 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,170.98

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Bort 4 on Calcady la E/E against the fall and an	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

						•	
Fill	in th	is informa	ition to identify your	case:			
Deb	tor 1	! 	Armando Pined	a,, Jr.			
	·		First Name	Middle Name	Last Name		
	tor 2 use if,	filing)	First Name	Middle Name	Last Name		
Unit	ed S	States Banl	cruptcy Court for the:	NORTHERN DISTRICT O	OF ILLINOIS, EASTERN DIVI	SION	
Cas	e nu	ımber		•			
(if kn						-	Check if this is an
<u> </u>					· · · · · · - · · · · · · · · · · · · · · · · · · ·	a	mended filing
Oti	Fici	al Ear	m 107				
			m 107 of Financial	Affairs for Individ	luale Filing for R	ankruntev	12/1
						qually responsible for supply	
infor	mat	ion. If mo	re space is needed, a			idditional pages, write your	
		_	every question.				
Par	ŧ 1:	Give De	talis About Your Ma	rital Status and Where You	Lived Before		
1.	Wha	at is your	current marital statu	s?			
		Married					
		Not marri	ed				
2.	Dur	ing the las	at 3 years, have you	lived anywhere other than w	vhere you live now?		
		No					
		Yes. List	all of the places you liv	red in the last 3 years. Do not i	nclude where you live now.		
	De	btor 1 Pric	or Address:	Dates Debtor 1 there	lived Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. state	Wit s an	hin the las	t 8 years, did you ev s include Arizona, Cal	er live with a spouse or lega ifornia, Idaho, Louisiana, Nev	al equivalent in a communit ada, New Mexico, Puerto Ric	y property state or territory? o, Texas, Washington and Wi	(Community property sconsin.)
		No					
			e sure you fill out Sche	edule H: Your Codebtors (Offic	cial Form 106H).		
Par	t 2	Explain	the Sources of You	r Income			
	Fill (in the total	amount of income you	nployment or from operating u received from all jobs and a nave income that you receive to	II businesses, including part-t		lar years?
		No Yes. Fill i	n the details.				
				Debtor 1		Debtor 2	
				Sources of income	Gross income	Sources of income	Gross income
				Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
			f current year until for bankruptcy:	■ Wages, commissions, bonuses, tips	\$2,989.34	☐ Wages, commissions, bonuses, tips	
				☐ Operating a business		☐ Operating a business	•
		calendar y 1 to Dec	year: ember 31, 2015)	■ Wages, commissions, bonuses, tips	\$29,840.00	☐ Wages, commissions, bonuses, tips	
				☐ Operating a business		☐ Operating a business	
Off-:	al Fo	rm 107		Statement of Financial Aff	fairs for Individuals Filing for B	ankruptcv	page

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Debtor 1 Pineda,, Armando Jr.				Case number (if known)			
				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco Check all that ap	
		dar year be December		■ Wages, commissions, bonuses, tips	\$27,483.00	☐ Wages, common bonuses, tips	nissions,
				☐ Operating a business		Operating a b	eusiness
5.	Include in other publ you are fill	come regard ic benefit pa ing a joint ca	less of whether yments; pensio se and you hav	ns; rental income; interest; div e income that you received too	ples of other income are ali idends; money collected fro gether, list it only once unde	mony; child support; \$ m lawsuits; royalties; a r Debtor 1.	Social Security, unemployment, and and gambling and lottery winnings. If
	List each	source and t	he gross incom	e from each source separatel	y. Do not include income the	at you listed in line 4.	
	■ No						
	⊔ Yes.	Fill in the de	etails.				
				Debtor 1 Sources of income Describe below	Gross income (before deductions and exclusions)	Debtor 2 Sources of inco Describe below.	me Gross income (before deductions and exclusions)
Ρá	art 3: Lis	t Certain Pa	yments You f	Made Before You Filed for E	Bankruptcy		
6.	Are eithe ☐ No.	Neither D individual	ebtor 1 nor De orimarily for a p	ersonal, family, or household	mer debts. Consumer debt purpose."		S.C. § 101(8) as "incurred by an
		During the No.	90 days before Go to line 7.	you filed for bankruptcy, did	you pay any creditor a total (of \$6,225" or more?	
		☐ Yes			a total of \$6 225* or more in	one or more navment	ts and the total amount you paid that
			creditor. Do payments to		nestic support obligations, s y case.	such as child support	and alimony. Also, do not include
	Yes.			both have primarily consul		of \$600 or marc?	
		During the	so days belore	e you filed for bankruptcy, did	you pay any creditor a total o	or about or more?	
		■ No.	Go to line 7.				
		□ Yes		r domestic support obligations			paid that creditor. Do not include include payments to an attorney for
	Creditor	's Name an	d Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this payment for
7.	<i>Insiders</i> in which you	clude your rare an office	elatives; any ge er, director, per	son in control, or owner of 209	y general partners; partners % or more of their voting sec	nips of which you are a curities; and any mana	as an insider? a general partner; corporations of ging agent, including one for a as child support and alimony.
	■ No						
	☐ Yes.	List all payn	nents to an insid	der			
	Insider's	Name and	Address	Dates of payme	nt Total amount paid	Amount you still owe	Reason for this payment

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an

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Det	otor 1	Pineda,, Armando Jr.	Case number (if known)			
	insid Inclu	ler? de payments on debts guaranteed or cosi	gned by an insider.			
		No Yes. List all payments to an insider				
	Insi	der's Name and Address	Dates of payment	Total amount paid		ason for this payment clude creditor's name
Par	t 4:	Identify Legal Actions, Repossession	ns, and Foreclosures	·		
9.	List a	in 1 year before you filed for bankrupt til such matters, including personal injury contract disputes.				
	_	No Yes. Fill in the details.				
		e title e number	Nature of the case	Court or agency	Sta	atus of the case
10.	With Chec	in 1 year before you filed for bankrupt ok all that apply and fill in the details belo	tcy, was any of your properw.	erty repossessed, for	eclosed, garnished, a	ttached, seized, or levied?
	_	No Yes. Fill in the information below.				
	Cre	ditor Name and Address	Describe the Property		Date	Value of the
			Explain what happene	d		property
11.		in 90 days before you filed for bankru ounts or refuse to make a payment bec		luding a bank or fina	ncial institution, set o	ff any amounts from your
	_	No Yes. Fill in the details.				
	Cre	ditor Name and Address	Describe the action the	creditor took	Date actio taken	n was Amoun
12.	With cour	in 1 year before you filed for bankrup t-appointed receiver, a custodian, or a	tcy, was any of your prope another official?	erty in the possession	n of an assignee for t	he benefit of creditors, a
	_	No Yes				
Par	t 5:	List Certain Gifts and Contributions			· · · · · · · · · · · · · · · · · · ·	
13.	_	in 2 years before you filed for bankru No	ptcy, did you give any gift	s with a total value of	f more than \$600 per	person?
		Yes. Fill in the details for each gift.				
	Gift	s with a total value of more than \$600 son	per Describe the gifts		Dates you the gifts	ı gave Valu
		son to Whom You Gave the Gift and lress:				
14.	With	in 2 years before you filed for bankru		s or contributions wi	th a total value of mo	re than \$600 to any charity
	Gift moi Cha	Yes. Fill in the details for each gift or consorted that to the second s	tal Describe what yo	u contributed	Dates you contribute	
-		Iress (Number, Street, City, State and ZIP Code)				
Pai	t 6:	List Certain Losses				

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

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Debt	lor 1 Pineda,, Armando Jr.	Case r	number (if known)	
	or gambling?			
	No			
	Yes. Fill in the details.	Describe any incurrence accorded for the less	Data of your	Value of meanage
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List per insurance claims on line 33 of Schedule A/B: Proper		Value of property los
Part	7: List Certain Payments or Transfe	ors .		
	Within 1 year before you filed for banks consulted about seeking bankruptcy or	ruptcy, did you or anyone else acting on your behalf		y to anyone you
	□ No			
	Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Heller & Richmond, Ltd. 33 N Dearborn St Ste 1907 Chicago, IL 60602-3828	0.00	02/24/16	\$750.00
	Within 1 year before you filed for bankin promised to help you deal with your crop on the include any payment or transfer that No.	ruptcy, did you or anyone else acting on your behalt editors or to make payments to your creditors? t you listed on line 16.	f pay or transfer any propert	y to anyone who
	☐ Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
1	transferred in the ordinary course of ye	rs made as security (such as the granting of a security in		
		Description and value of De	reariba anu nranartu ar	Data transfor uma
	Person Who Received Transfer Address	property transferred pa	escribe any property or hyments received or debts hid in exchange	Date transfer was made
	Person's relationship to you			
	Within 10 years before you filed for bar beneficiary? (These are often called asse	nkruptcy, did you transfer any property to a self-set et-protection devices.)	tled trust or similar device o	f which you are a
	Yes. Fill in the details.			
	Name of trust	Description and value of the property tra	ansferred	Date Transfer was made

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Deb	otor 1	Pineda,, Armando Jr.			Case numl	Der (if known)			
Par	t 8:	List of Certain Financial Accounts, Instr	ruments, Safe Deposit B	oxes, and Stor	age Units				
20.	sold	ithin 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, old, moved, or transferred? clude checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage buses, pension funds, cooperatives, associations, and other financial institutions.							
	_	No Yes, Fill in the details.							
		dress (Number, Street, City, State and ZIP	Last 4 digits of account number	Type of accou instrument	int or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
21.		you now have, or did you have within 1 ye h, or other valuables?	ar before you filed for b	ankruptcy, any	/ safe depo	sit box or other depos	itory for securities,		
		No							
		Yes. Fill in the details.							
		me of Financial Institution dress (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, Str and ZIP Code)		Describe t	the contents	Do you still have it?		
22.	Hav	e you stored property in a storage unit or	place other than your h	ome within 1 y	ear before	you filed for bankrupte	су		
		No Yes. Fill in the details.							
		me of Storage Facility dress (Number, Street, City, State and ZIP Code)	Who else has or ha to it? Address (Number, Str and ZIP Code)		Describe (the contents	Do you still have it?		
Par	t 9:	Identify Property You Hold or Control for	or Someone Else						
23.		you hold or control any property that som neone.	eone else owns? Includ	e any property	you borro	wed from, are storing t	for, or hold in trust for		
		No							
		Yes. Fill in the details.							
		vner's Name dress (Number, Street, City, State and ZIP Code)	Where is the prope (Number, Street, City, St Code)		Describe t	the property	Value		
Par	t 10:	Give Details About Environmental Infor	mation						
or	the p	ourpose of Part 10, the following definition	s apply:						
	tox	vironmental law means any federal, state, o ic substances, wastes, or material into the trolling the cleanup of these substances, v	air, land, soil, surface v		• •	•			
		means any location, facility, or property and operate, or utilize it, including disposal s		vironmental la	w, whether	you now own, operate	, or utilize it or used to		
		<i>tardous material</i> means anything an envirc terial, pollutant, contaminant, or similar ter		a hazardous w	/aste, haza	rdous substance, toxic	substance, hazardous		
₹ер	ort a	il notices, releases, and proceedings that	you know about, regard	less of when th	ney occurr	ed.			
24.	Has	any governmental unit notified you that y	ou may be liable or pot	entially liable u	nder or in	violation of an environ	mental law?		
		No							
		Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Str ZIP Code)			onmental law, if you it	Date of notice		

Case 16-06224 Doc 1 Filed 02/25/16 Entered 02/25/16 10:14:14 Page 47 of 65 Document Case number (if known) Debtor 1 Pineda,, Armando Jr. 25. Have you notified any governmental unit of any release of hazardous material? No ☐ Yes. Fill in the details. Date of notice Environmental law, if you Governmental unit Name of site Address (Number, Street, City, State and know it Address (Number, Street, City, State and ZIP Code) ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. ☐ Yes. Fill in the details. Court or agency Nature of the case Status of the Case Title case **Case Number** Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper **Dates business existed** 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Yes. Fill in the details below. Date Issued Name Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 Armando Pinedá., Jr. Signature of Debtor 1 Date Date February 24, 2016 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ■ No . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). ☐ Yes. Name of Person_ page 6 Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107

1st Crd Srvc 377 Hoes Ln Piscataway, NJ 08854-4138

Americash Loans
Bankruptcy Department 880 Lee St. Ste 30
Des Plaines, IL 60016

Banfield Pet Hospital 2221 Oakton Skokie, IL 60076

Barclays Bank Delaware 125 S West St Wilmington, DE 19801-5014

Barclays Bank Delaware PO Box 8801 Wilmington, DE 19899-8801

Capital One Attn: Bankruptcy PO Box 30285 Salt Lake City, UT 84130-0285

Capital One 15000 Capital One Dr Richmond, VA 23238-1119 Castle Pay Loans N5384 US Highway 45 Ste 400 Watersmeet, MI 49969

Citi-citgo PO Box 6497 Sioux Falls, SD 57117-6497

Citi-Shell PO Box 6497 Sioux Falls, SD 57117-6497

Comcast PO Box 3002 Southeastern, PA 19398-3002

Comenity Bank/Carsons 3100 Easton Square Pl Columbus, OH 43219-6232

Comenity Bank/Carsons PO Box 182125 Columbus, OH 43218-2125

Comenity Bank/Express PO Box 182789 Columbus, OH 43218-2789 Comenity Bank/New York & Company PO Box 182125 Columbus, OH 43218-2125

Comenity Bank/Nwyrk&Co 220 W Schrock Rd Westerville, OH 43081-2873

Comenity Bank/Vctrssec PO Box 182789 Columbus, OH 43218-2789

Comenity Bank/Vctrssec PO Box 182125 Columbus, OH 43218-2125

Credit One Bank NA PO Box 98873 Las Vegas, NV 89193-8873

Creditonebnk PO Box 98875 Las Vegas, NV 89193-8875

Discover Fin Svcs LLC PO Box 15316 Wilmington, DE 19850-5316 Discover Financial Attn: Bankruptcy PO Box 3025 New Albany, OH 43054-3025

Dsnb Macys 9111 Duke Blvd Mason, OH 45040-8999

Erc 8014 Bayberry Rd Jacksonville, FL 32256-7412

Erc/Enhanced Recovery Corp 8014 Bayberry Rd Jacksonville, FL 32256-7412

First Premier Bank 601 S Minniapolis Ave Sioux Falls, SD 57104

Fst Premier 3820 N Louise Ave Sioux Falls, SD 57107-0145

Gold S Gym Woodlands 11 Currency Dr Bloomington, IL 61704-9398 Jared-Galleria of Jwlr 375 Ghent Rd Fairlawn, OH 44333-4601

Jared/Sterling Jewelers Attn: Bankruptcy PO Box 3680 Akron, OH 44309-3680

Kay Jewelers
375 Ghent Rd
Fairlawn, OH 44333-4601

Kay Jewelers/Sterling Jewelers Inc. Sterling Jewelers PO Box 1799 Akron, OH 44309-1799

Kohls/Capital One PO Box 3120 Milwaukee, WI 53201-3120

Kohls/capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051

Major Energy 100 Dutch Hill Rd Ste 230 Orangeburg, NY 10962-2198 Monterey Financial Svc 4095 Avenida de la Plata Oceanside, CA 92056-5802

Monterey Financial Svc PO Box 5199 Oceanside, CA 92052-5199

Regional Acceptance Co 765 Ela Rd Ste 205 Lake Zurich, IL 60047-6305

Regional Acceptance Co Attn: Bankruptcy 266 Beacon Dr Winterville, NC 28590-7924

Santander Consumer USA PO Box 961245 Fort Worth, TX 76161-0244

Santander Consumer USA 8585 N Stemmons Fwy Ste 1100-N Dallas, TX 75247-3822

SPRINT
Bankruptcy Department 6200 Sprint Parkwa
Overland Park, KS 66251

Syncb Bank/American Eagle Attn: Bankruptcy PO Box 103104 Roswell, GA 30076-9104

Syncb/amazon PO Box 965015 Orlando, FL 32896-5015

Syncb/Amer Eagle PO Box 965005 Orlando, FL 32896-5005

Syncb/banana Rep PO Box 965005 Orlando, FL 32896-5005

Syncb/Bp PO Box 965024 Orlando, FL 32896-5024

Syncb/Care Credit 950 Forrer Blvd Kettering, OH 45420-1469

Syncb/dsctir C/o PO Box 965036 Orlando, FL 32896-5036 Syncb/oldnav PO Box 965005 Orlando, FL 32896-5005

Syncb/plcc Attn: Bankruptcy PO Box 103104 Roswell, GA 30076-9104

Syncb/qvc PO Box 965018 Orlando, FL 32896-5018

Syncb/tjx PO Box 965005 Orlando, FL 32896-5005

Syncb/walmar PO Box 965024 Orlando, FL 32896-5024

Synchrony Bank/ Hh Gregg Attn: Bankruptcy PO Box 103104 Roswell, GA 30076-9104

Synchrony Bank/ Old Navy Attn: Bankruptcy PO Box 103104 Roswell, GA 30076-9104 Synchrony Bank/Amazon Attn: Bankruptcy PO Box 103104 Roswell, GA 30076-9104

Synchrony Bank/Banana Republic Attn: Bankruptcy PO Box 103104 Roswell, GA 30076-9104

Synchrony Bank/Care Credit Attn: bankruptcy PO Box 103104 Roswell, GA 30076-9104

Synchrony Bank/Qvc GE Credit Retail Bank/Attn: Bankruptcy PO Box 103104 Roswell, GA 30076-9104

Synchrony Bank/Tjx Attn: Bankruptcy PO Box 103104 Roswell, GA 30076-9104

Synchrony Bank/Walmart Attn: Bankruptcy PO Box 103104 Roswell, GA 30076-9104 Visa Dept Store National Bank Attn: Bankruptcy PO Box 8053 Mason, OH 45040-8053 Case 16-06224 Doc 1 Filed 02/25/16 Entered 02/25/16 10:14:14 Desc Main Document Page 58 of 65

United States Bankruptcy Court Northern District of Illinois, Eastern Division

IN RE:	Case No
Pineda,, Armando Jr.	Chapter 7
Debtor(s)	•
VERIFICATI	ON OF CREDITOR MATRIX
	Number of Creditors62
The above-named Debtor(s) hereby verifies that the	list of creditors is true and correct to the best of my (our) knowledge.
	The polo of
Debtor	
Joint Debtor	

Till to Abic information to identify your		
Fill in this information to identify your case:		
Debtor 1 Armando Pineda,, Jr. First Name Middle Name	Last Name	
Debtor 2 (Spouse if, filing) First Name Middle Name	Last Name	
	TRICT OF ILLINOIS, EASTERN DIVISION	
Officed States Bankruptcy Court for the.	TRIOT OF IEEEROIG, EASTERN DIVISION	
Case number (if known)		☐ Check if this is an
		amended filing
Official Form 108		
Statement of Intention for Indi	viduals Filing Under Chapte	r 7 12/15
If you are an individual filing under chapter 7, you must fill	l out this form if:	
 creditors have claims secured by your property, or you have leased personal property and the lease has no 	ot expired.	
You must file this form with the court within 30 days after	you file your bankruptcy petition or by the date set fo	
whichever is earlier, unless the court extends the the form	e time for cause. You must also send copies to the cre	editors and lessors you list on
If two married people are filling together in a joint case, bot	th are equally responsible for supplying correct inforr	nation. Both debtors must sign
and date the form.		
Be as complete and accurate as possible. If more space is write your name and case number (if known).	needed, attach a separate sheet to this form. On the t	op of any additional pages,
write your name and case number (ii known).		
Part 1: List Your Creditors Who Have Secured Claims		
For any creditors that you listed in Part 1 of Schedule D information below.	: Creditors Who Have Claims Secured by Property (Of	ficial Form 106D), fill in the
Identify the creditor and the property that is collateral	What do you intend to do with the property that	Did you claim the property
	secures a debt?	as exempt on Schedule C?
Crediteds - Particulat Assessance Co		=
Creditor's Regional Acceptance Co	 ☐ Surrender the property. ☐ Retain the property and redeem it. 	■ No
Description of COOS Observator 200 Tourism Prod	Retain the property and enter into a Reaffirmation	☐ Yes
Description of 2005 Chrysler 300 Touring Rwd 4dr Sedan (3.5L 6cyl 4A)	Agreement. Retain the property and [explain]:	
securing debt:	Control of the property and texplain.	
Creditor's Santander Consumer USA	☐ Surrender the property.	■ No
name:	Retain the property and redeem it.	
Description of 2013 Hyundai Sonata GLS 4dr	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property Sedan (2.4L 4cyl 6A)	Retain the property and [explain]:	
securing debt:		
Part 2: List Your Unexpired Personal Property Leases	_	
For any unexpired personal property lease that you listed the information below. Do not list real estate leases. Unexp	in Schedule G: Executory Contracts and Unexpired L	eases (Official Form 106G), fill in
may assume an unexpired personal property lease if the t	rustee does not assume it. 11 U.S.C. § 365(p)(2).	. postonia nacinot y ot onaca. 10a
Describe your unexpired personal property leases		Will the lease be assumed?
Lessor's name:		
	ntention for Individuals Filing Under Chapter 7	naga 1

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Debtor 1 Pineda,, Armando Jr.	Case number(if known)
Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased	□ No
Property: Lessor's name: Description of leased	☐ Yes
Property: Lessor's name: Description of leased	☐ Yes
Property: Part 3: Sign Below	☐ Yes
Under penalty of perjury, I declare that I have indicated my intention about any property that is subject to an unexpired lease. X X	
Armando Pineda,, Jr. Signature of Debtor 1	ature of Debtor 2
Date February 24, 2016 Date	

 $_{B201B\;(Form\;2018)}\textbf{Case}_{12/29}\textbf{6-06224}$

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Northern District of Illinois, Eastern Division

IN RE:		Case No.	
Pineda,, Armando Jr.		Chapter 7	
Debtor(s)			
CERTIFICATION OF NO UNDER § 342(b) OF	TICE TO CONSUMER THE BANKRUPTCY	* *	
Certificate of [Non-Attor	ney] Bankruptcy Petitio	n Preparer	
I, the [non-attorney] bankruptcy petition preparer signing the onotice, as required by § 342(b) of the Bankruptcy Code.	debtor's petition, hereby cer	tify that I delivered to the debtor the attached	
Printed Name and title, if any, of Bankruptcy Petition Preparer Address:		Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)	
X		(Required by 11 U.S.C. § 110.)	
Signature of Bankruptcy Petition Preparer of officer, principal partner whose Social Security number is provided above.	, responsible person, or		
Certific	cate of the Debtor		
I (We), the debtor(s), affirm that I (we) have received and read	d the attached notice, as requ	nired by § 342(b) of the Bankruptcy Code.	
Pineda,, Armando Jr.	X /s/ Armando Pine	eda,, Jr. 2/25/2016	
Printed Name(s) of Debtor(s)	Signature of Debte	Date:	
Case No. (if known)	XSignature of Joint		
	Signature of Joint	Debtor (if any)	

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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B201B (Form 201B) (12/09)

United States Bankruptcy Court Northern District of Illinois, Eastern Division

IN RE:	Case No Chapter 7		
Pineda,, Armando Jr.			
Debtor(s) CERTIFICATION OF NOTICE TO CONSUME	D DERTOD/S		
UNDER § 342(b) OF THE BANKRUPTC	The state of the s		
Certificate of [Non-Attorney] Bankruptcy Peti	tion Preparer		
I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby onotice, as required by § 342(b) of the Bankruptcy Code.	certify that I delivered to the debtor the attached		
Printed Name and title, if any, of Bankruptcy Petition Preparer Address:	Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)		
X	<u> </u>		
Certificate of the Debtor			
I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as r	required by § 342(b) of the Bankruptcy Code.		
Printed Name(s) of Debtor(s) X Signature of Debtor(s)	2/24/2016 ebtor Date		
Case No. (if known) X Signature of Jo	int Debtor (if any) Date		

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois, Eastern Division

In re	Pineda,, Armando Jr.		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPI	ENSATION OF ATT	ORNEY FOR D	EBTOR	
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the filing the rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankrupto	cy, or agreed to be paid	l to me, for services re	at endered or to
	For legal services, I have agreed to accept		\$	750.00	
	Prior to the filing of this statement I have received			750.00	
	Balance Due		\$	0.00	
2. 7	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed comp firm.	pensation with any other person	on unless they are men	nbers and associates o	f my law
1	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na				law firm. A
5.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspe	ects of the bankruptcy	case, including:	
t c	a. Analysis of the debtor's financial situation, and render. b. Preparation and filing of any petition, schedules, state. c. Representation of the debtor at the meeting of credit d. [Other provisions as needed]	tement of affairs and plan whi	ch may be required;	-	cruptcy;
6. I	By agreement with the debtor(s), the above-disclosed fe	ee does not include the following	ing service:		
		CERTIFICATION			
	I certify that the foregoing is a complete statement of an ankruptcy proceeding.	ny agreement or arrangement f	for payment to me for	representation of the o	debtor(s) in
F	ebruary 25, 2016	/s/ Michael R. Ri	ichmond		
Date		Michael R. Rich			
		Signature of Attorn Heller & Richmo			
		33 N Dearborn S	St Ste 1907		
		Chicago, IL 606	02-3828	_	
			Fax: (312) 781-6732 Ellerrichmond.com	2	
		Name of law firm			

ATTORNEY-CLIENT AGREEMENT

This Agreement is made this 15th day of February, 2016 by and between Heller & Richmond, Ltd. (hereinafter referred to as "Attorney) of 33 N. Dearborn St., Suite 1907, Chicago, IL 60602 Armando Pineda, Jr. (hereinafter referred to as "Client") of Chicago, IL

WHEREAS, "Client" desires to engage the legal services of "Attorney" to advise and represent "Client" concerning "Client's" desire to seek Bankruptcy relief pursuant to title 11 of the United States Code; and

WHEREAS, "Attorney" desires to provide such legal services to "Client":

IT IS HEREBY AGREED by and between the Parties hereto, in consideration of the mutual covenants contained herein:

TERMS OF AGREEMENT

- 1. Professional Legal Services to be Provided.
- A. Attorney shall provide the following professional legal services for "Client" in the above referenced bankruptcy matter:
 - 1. Analysis of the "Client's" financial situation and rendering advice to the "Client" in determining whether to file a petition in bankruptcy;
 - 2. Preparation and filing of any petition, schedules, statement of affairs, or plan which may be required.
 - 3. Representation of "Client" at the meeting of the creditors and confirmation hearing;
 - 4. Other:
- B. Professional legal services to be provided by "Attorney" to "Client shall not include:
 - 1. Rendering advice or representing any other person or entity related to or a dependent of "Client";
 - 2. Filing a notice of appeal, or prosecuting or defending an appeal of any judicial ruling, except by separate agreement of the parties, hereto; or,
 - 3. Representing "Client" in any other judicial or administrative or alternative dispute resolution proceeding, except by separate agreement of the parties, hereto;
 - 4. The filing of any adversary complaint to determine the dischargability of an otherwise non-dischargeable debt.
- Compensation for Legal Service Provided. "Client" agrees to pay to "Attorney" and "Attorney" agrees to accept from "Client" \$750.00 for the performance of these services (hereinafter referred to as "fee") in addition to the costs of approximately three hundred ninety five dollars**
 (\$395.00)

It is hereby acknowledged that this "fee" has been based upon "Client's" representation that he/she has the following type and number of debts:

- a. -2- secured creditors; (client wishes to retain both vehicles)
- b. -*- unsecured creditors; (*UP TO 30 UNSECURED CREDITORS)
- c. -0- priority debts; (GOVT. DEBT INCLUDING STUDENT LOAN IS GENERALLY NOT DISCHARGABLE)

This stated "fee" has been further based upon "Client's representation that he/she has:

- a. -0- law suits pending against him/her;
- b. -0- wage assignments pending against him/her.

"Client" agrees to pay an additional fee of one hundred dollars (\$100.00) for each of the following additional items that have not been disclosed above:

- a. each secured creditor;
- b. each group of up to ten unsecured creditors over the first ten unsecured creditors;
- c. each law suit or wage assignment pending against "Client" at the time the bankruptcy is filed;
- d. "Attorney" notification to the Secretary of State of the bankruptcy in the event "Client"s driving privileges had been previously suspended in accordance with the financial responsibility laws of the State of Illinois

"Client" also acknowledges that the "fee" has been determined based upon the minimal amount of expected work to be performed on this bankruptcy matter, and that if additional legal services, such as representing "Client" in contested matters or adversary proceedings, must be performed, if "Client" falls to attend a meeting of the creditors or any court hearing or if the petition, once prepared, has to be revised due to "Client's" failure to provide complete or accurate information, including but not limited to the list of creditors as referred to in Section 5(f) below or if "Attorney" is forced to take any steps to collect any past due Attorneys fees from "Client", "Client" shall be responsible for additional fees at a rate of two hundred fifty dollars (\$250.00) per hour.

"Client" agrees to pay all fees and court costs as follows:

- 1. \$600.00 upon the execution of this agreement;
- 2. Balance due prior to filing, but within 90 days

"Client" acknowledges that "Attorney" is not responsible for filing a petition or initiating any bankruptcy proceeding until "Client" has paid "Attorney" at least \$1,145.00 and that any monies paid upon the execution of this agreement are non-refundable and are intended to compensate "Attorney" for his time spent in compiling the information necessary to prepare, or other steps towards the preparation of, a petition in bankruptcy.

3. Client Cooperation. "Client" agrees to fully cooperate with "Attorney" in performing professional legal services, including, but not limited to, fully disclosing all of "Client's" potential assets and liabilities, timely appearing at meetings and hearings, promptly returning phone calls from "Attorney" to "Client", promptly communicating any changes in circumstances to "Attorney", including change of employment and change of address, and paying all legal fees and expenses as they become due. "Client" hereby warrants and covenants that he/she has fully disclosed to "Attorney" all known or suspected real property, tangible and intangible personal property, debts, leases contracts, claims in favor of or against "Client" and taxes owed.

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4. Termination of Agreement.

- A. "Client" may terminate this Agreement with "Attorney" at any time upon written notice to "Attorney". In the event of such termination, "Client" shall pay all legal fees incurred and shall notify "Attorney" in writing, if "Client" desires his/her file turned-over to any person or entity.
- B. "Attorney" may terminate this Agreement upon written notice to "Client" for "cause". "Cause shall include, but shall not be limited to the following:
 - "Attorney" learning of "Client's" intention to commit an act that may constitute a bankruptcy crime or fraud or other unlawful conduct, and "Client's" refusal to refrain from such conduct;
 - 2. "Client's" failure to promptly pay legal fees or expenses incurred; or
 - 3. Any other permissive or mandatory cause to withdraw form the Attorney-Client relationship as provided for in the Code of Professional Responsibility.

5. "Client" acknowledgment.

- A. "Attorney" has advised "Client" that his/her spouse, if any is jointly liable for many of "Client's" debts that have been incurred, since the time of "Client's" marriage and that "Client's" spouse can be held responsible for these debts, unless the spouse files a joint or separate petition for bankruptcy. "Attorney" has advised "Client" that there would be no additional legal "fee" or court costs to add the "Client's" spouse on a joint petition for bankruptcy, provided that the spouse does not have any creditors other than those upon which "Client's" fee was based.
- B. "Attorney" has advised "Client" that some debts may not be dischargeable and in particular, secured debts or those in which "Client" has pledged some property as collateral against a loan or other financing, are not dischargeable, unless "Client" is willing to return the property, which has been pledged as collateral, to the creditor. "Client" has been further advised that in many instances he/she may retain the property, which has been pledged as collateral, if he/she agree to reaffirm the debt and continue to pay the creditor, as they were bound to do, before the filing of bankruptcy.
- C. "Attorney" has reviewed with "Client" his/her options to file under Chapter 7, Chapter 11 and Chapter 13 of Title 11 of the United States Code and "Client" has elected to proceed under Chapter 7 "Client" is aware that if he/she proceeds with a Chapter 7 then he/she will be required to forfeit any and all property owned in full or in part by "Client" other than those exemptions permitted by statute and in most instances the amount of property entitled to those exemptions is minimal. The property that could be forfeited includes, but is not limited to real estate, cash, bank accounts, household goods and furnishings, appliances, artwork, collections, sports equipment, tools, jewelry, income tax refunds, vehicles or anything else of value or potential value.
- D. "Client" acknowledges that he/she has read both front and back of this agreement and "Attorney" has answered any questions that "Client" may have had about its content.
 - E. "Client" acknowledges receipt of a copy of this agreement at the time of its execution.
- F. It is the obligation of "Client" to supply "Attorney" with a neat, legible and complete list of all creditors of "Client" and for each creditor include their complete name, address, account number and balance owed; also, if that account was referred to a collection agency or lawyer then also include the name, address and account number of the collection agency or lawyer.
- G. "Client" understands that "Attorney's" obligation to represent "Client" will end no later than upon the entry of the Order of Discharge in Bankruptcy and "Client" will be responsible for payment of additional fees at the rate of two hundred dollars (\$200.00) per hour for any service that might be requested after the entry of the Order of Discharge including but not limited to telephone advise, file retrieval, providing copies of any file related documents and issues concerning credit bureau reports, obtaining credit or other forms of credit repair.
- H. "Client" hereby warrants and covenants that he/she has truthfully and fully disclosed to "Attorney" all known or suspected information requested by any aspect of the entire Bankruptcy Petition and that it is the responsibility of "Client" to be certain that this information is all accurately displayed in the actual Bankruptcy Petition at the time "Client" affixes his/her signaturals) thereto.

** costs include the court filing fee of \$335.00, the online prebankruptcy counseling and online debt management class and the 3-bureau credit report of \$60.00 for an individual report or \$70.00 for a joint report for husband and wife.

By:
HELLER & RICHMOND, LTD.
33 N. Dearborn Street
Suite 1907
Chicago, IL 60602
(312) 781-6700

Heller & Richmond, Ltd.

By affixing my signature above, I hereby certify that I have not filed any petition for bankruptcy within the past 8 years, except as otherwise noted as follows:

I AGREE TO ALL THE TERMS CONTAINED IN THIS DOCUMENT

____NONE____

YES, I HEREBY INSTRUCT ATTORNEY TO PROVIDE CLIENT WITH A 3-BUREAU CREDIT REPORT and I AGREE TO PAY THE COST OF THIRTY FIVE DOLLARS (\$35.00) per person FOR THE REPORT IN ADDITION TO ALL OTHER FEES. This additional fee must be paid before the Bankruptcy Petition will be filed.